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Docket Number (Optional)

REISSUE APPLICATION DECLARATION BY THE INVENTOR

1828.0002M

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed

in patent number 5,844,757, granted December 1, 1998, and for which a reissue patent is sought on the invention entitled Personal Computer Data Storage Card and Method for Transferring Information Between the Data Storage Card and Personal Computers, the specification and amendment of which☒ are attached hereto.☐ was filed on _____ as reissue application number ____ / _____
and was amended on _____
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

- ☐ by reason of a defective specification or drawing.
- ☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.
- ☐ by reason of other errors.

At least one error upon which reissue is based is described as follows:

The patentee claimed less than he had a right to claim and, therefore, this re-issue is a broadening re-issue.

The patent claims recite the feature of a magnetic medium, however, the patentee had the right to claim data storage features broader in scope.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)
1828.0002M

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s)	Registration Number
Stuart B. Shapiro	40,169
Andrew J. Aldag	40,483

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

OR

Type Customer Number here

Place Customer Number Bar
Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Epstein, Edell, Shapiro & Finnan, LLC				
Address	1901 Research Boulevard				
Address	Suite 400				
City	Rockville	State	MD	ZIP	20850-3164
Country	USA				
Telephone	(301) 424-3640	Fax	(301) 762-4056		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

David H. Rose

Inventor's signature

11/29/2000

Residence
9803 DePaul Drive, Bethesda, Maryland 20817

Date

Post Office Address
9803 DePaul Drive, Bethesda, Maryland 20817

Citizenship
US

Full name of second joint inventor (given name, family name)

Inventor's signature

Date

Residence

Citizenship

Post Office Address

Full name of third joint inventor (given name, family name)

Inventor's signature

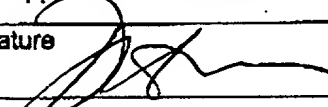
Date

Residence

Citizenship

Post Office Address

☐ Additional joint inventors are named on separately numbered sheets attached hereto.

REISSUE APPLICATION BY THE INVENTOR, OFFER TO SURRENDER PATENT		Docket Number (Optional) 1828.0002M
<p>This is part of the application for a reissue patent based on the original patent identified below.</p> <p>Name of Patentee(s) David H. Rose</p> <p>Patent Number 5,844,757</p> <p>Date Patent Issued December 1, 1998</p> <p>Title of Invention PERSONAL COMPUTER DATA STORAGE CARD AND METHOD FOR TRANSFERRING</p> <p>I am the inventor of the original patent.</p> <p>I offer to surrender the original patent.</p> <p>1. <input type="checkbox"/> Filed herein is a certificate under 37 CFR 3.73(b).</p> <p>2. <input checked="" type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent has been made.</p> <p>One of boxes 1 or 2 above must be checked.</p> <p>The written consent of all assignees owning an undivided interest in the original patent is included in this application for reissue.</p>		
Signature 	Date 11/29/2000	
Typed or printed name David H. Rose		
<p>The assignee owning an undivided interest in said original patent is _____ and the assignee consents to the accompanying application for reissue.</p> <p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.</p>		
Name of assignee		
Signature of person signing for assignee	Date	
Typed or printed name and title of person signing for assignee		

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/51 (12-97)

Approved for use through 9/30/00. OMB 0651-0033

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION DECLARATION BY THE INVENTOR	Docket Number (Optional) 1828.0002M
<p>As a below named inventor, I hereby declare that: My residence, post office address and citizenship are stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number <u>5,844,757</u>, granted <u>December 1, 1998</u>, and for which a reissue patent is sought on the invention entitled <u>Personal Computer Data Storage Card and Method for Transferring Information Between the Data Storage Card and Personal Computers</u>, the specification and amendment of which</p> <p><input checked="" type="checkbox"/> are attached hereto.</p> <p><input type="checkbox"/> was filed on _____ as reissue application number ____ / _____ and was amended on _____ (If applicable)</p> <p>I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56. I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input type="checkbox"/> by reason of a defective specification or drawing. <input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent. <input type="checkbox"/> by reason of other errors.</p> <p>At least one error upon which reissue is based is described as follows: The patentee claimed less than he had a right to claim and, therefore, this re-issue is a broadening re-issue. The patent claims recite the feature of a magnetic medium, however, the patentee had the right to claim data storage features broader in scope.</p>	

[Page 1 of 2]

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Docket Number (Optional)

1828.0002M

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Andrew J. Aldag	40,483
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Full name of sole or first inventor (given name, family name)

David H. Rose

Inventor's signature

Residence
9803 DePaul Drive, Bethesda, Maryland 20817

Date _____

11/29/2000

Post Office Address

9803 DePaul Drive; Bethesda, Maryland 20817

Citizenship	US
-------------	----

Full name of second joint inventor (given name, family name)

Inventor's signature

Date _____

Residence

Citizenship

Post Office Address

Full name of third joint inventor (given name, family name)

Inventor's signature

Date _____

Residence

Citizenship

Post Office Address

☐ Additional joint inventors are named on separately numbered sheets attached hereto.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the REISSUE application of

David Rose

Patent No.: 5,844,757

Application Serial No.: 08/544,950

Filed: Herewith

For: PERSONAL COMPUTER DATA STORAGE CARD AND METHOD FOR
TRANSFERRING INFORMATION BETWEEN THE DATA STORAGE CARD
AND PERSONAL COMPUTERS

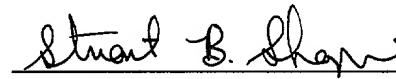
ASSERTION OF SMALL ENTITY STATUS

BOX REISSUE

Assistant Commissioner for Patents
Washington, D. C. 20231

Applicant established small entity status in original Patent No. 5,844,757, and a copy of the Small Entity Declaration filed during prosecution of that patent is submitted herewith. The small entity status of Applicant is still proper and desired. Accordingly, small entity status is entitled to be asserted for the above-identified reissue application.

Respectfully submitted,



Stuart B. Shapiro
Registration No. 40,169

EPSTEIN, EDELL, SHAPIRO & FINNAN, LLC
1901 Research Boulevard, Suite 400
Rockville, Maryland 20850-3164
(301) 424-3640

Hand-delivered: November 30, 2000

SMALL ENTITY DECLARATION

The undersigned declares that the application attached hereto is entitled to the benefits of "small entity" status for paying reduced fees under 35 U.S.C. 41 (a) and (b) to the Patent and Trademark Office by virtue of the following:

The undersigned declares that he qualifies as an independent inventor, or would qualify had he made the invention, as defined in 37 CFR 1.9(c).

The undersigned acknowledges the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate 37 CFR 1.28(b).

The undersigned hereby declares that all statements made herein of his own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application, any patent issued thereon, or any patent to which this declaration is directed.

David H. Rose
Typed Name of Inventor


Signature

10-16-75
Date